



PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or **Fax** (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

24263 7590 02/13/2006

SCHERING-PLOUGH CORPORATION
PATENT DEPARTMENT (K-6-1, 1990)
2000 GALLOPING HILL ROAD
KENILWORTH, NJ 07033-0530

03/09/2006 TBESHAH2 00000020 190365 10776988

01 FC:1501 1400.00 DA

02 FC:1504 300.00 DA

03 FC:4001 APPLICATION 0000.00 DA

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Palaiyur S. Kalyanaraman (Depositor's name)
[Signature] (Signature)
March 8, 2006 (Date)

01 FC:1501 1400.00 DA	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
-----------------------	-------------	----------------------	---------------------	------------------

190716.988 02/11/2004 Timothy J. Guzi DC01617K1 5341

TITLE OF INVENTION: NOVEL PYRAZOLOPYRIMIDINES AS CYCLIN DEPENDENT KINASE INHIBITORS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	05/15/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
MCKENZIE, THOMAS C	1624	544-281000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Palaiyur S. Kalyanaraman

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Schering Corporation
Pharmacoepia Drug Discovery, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Kenilworth, New Jersey
Cranbury, New Jersey

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee

☒ Publication Fee (No small entity discount permitted)

☒ Advance Order - # of Copies **20**

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number **19-0365** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature: *[Signature]*

Date **03/08/2006**

Typed or printed name **Palaiyur S. Kalyanaraman**

Registration No. **34,634**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



SCHERING-PLOUGH CORPORATION
LAW DEPARTMENT
2000 GALLOPING HILL ROAD
K-6-1, MAIL STOP 1990
KENILWORTH, NEW JERSEY 07033
(908) 298-4000

FACSIMILE TRANSMITTAL SHEET

TO: USPTO
(Issue Fee)
Examiner: Thomas C. McKenzie

FAX NUMBER:
(571) 273-2885

FROM: Palaiyur S. Kalyanaraman

PHONE NUMBER:
(908) 298-5068

TOTAL NO. OF PAGES INCLUDING COVER
4

DATE
March 8, 2006

CONFIDENTIALITY NOTE: This sheet and/or the document(s) accompanying it contain information belonging to Schering-Plough Corporation and/or its affiliates which is confidential and/or legally privileged. The information is intended only for the use of the individual or entity named above. If you have received this fax in error, please immediately notify us by telephone. If there is a problem with this transmission please call Ashly Armstrong at (908) 298-4025.

NOTES/COMMENTS:

PLEASE HAND DELIVER

In re Application of: Timothy J. Guzi *et al.*

For Patent: "Novel Pyrazolopyrimidines as Cyclin Dependent Kinase Inhibitors"

Group Art Unit: 1624


Attorney Docket No.: OC01617K1

US/ Serial No.: 10/776,988

Filed: 02/11/2004

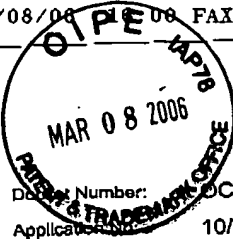
Transmitted herewith are:

- Fax Cover Sheet – 1 Page
- Certification of Transmission – 1 Page
- Issue Fee Transmittal (Part B) – 1 Page in duplicate


Palaiyur S. Kalyanaraman
Registered Representative
Registration No. 34,634

PHONE: (908) 298-5068

FAX: (908) 298-5388



Document Number: OC01617K1

Application Number: 10/776,988

Filing Date: 02/11/2004

First Inventor: GUZI, Timothy J

PTO/SB/97 (08-04)

Approved for use through 07/31/2008. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office at (571) 273-2885

on 03/08/2006
Date

Signature

PALANIYUR S. KALYANARAMAN

Typed or printed name of person signing Certificate

34,634

Registration Number, if applicable

908-298-5068

Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

- Fax Cover Sheet – 1 Page
- Certification of Transmission – 1 Page
- Issue Fee Transmittal (Part B) – 1 Page in duplicate

This collection of information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1.8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.